

Event Code List
Nationally Notifiable Diseases and Other Conditions of Public Health Importance
Division of Integrated Surveillance Systems and Services, National Center for Public Health Informatics,
Centers for Disease Control and Prevention
January 2006

Code	Event	Notes+	Verification Procedures	Print Criteria†
10245	African Tick Bite Fever			
10560	AIDS*	No longer collected through NETSS. Data supplied to NNDSS by CDC HIV/AIDS program on monthly basis.		Print criteria are determined by the CDC AIDS/HIV program.
11040	Amebiasis	Deleted from NNDL in 1995.		
10350	Anthrax*		Before printing, CDC will verify provisional case reports via consultation with a State Epidemiologist; cases will be withheld from <i>MMWR</i> publication pending confirmation by NCID. Following these procedures, all cases meeting print criteria will be printed.	Confirmed; unknown reported from California (CA) that are verified to be confirmed.
10010	Aseptic meningitis	Deleted from NNDL in 1995.		
32020	Asthma, Work-related			
12010	Babesiosis			
10650	Bacterial meningitis, other	Extended record format available for NETSS transmission.		
10530	Botulism, foodborne*			Confirmed and probable; unknown from CA
10540	Botulism, infant*			Confirmed; unknown from CA

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Code	Event	Notes+	Verification Procedures	Print Criteria†
10550	Botulism, other (includes wound)*	Codes 10548 and 10549 can be used to track "other unspecified" and "wound" botulism separately. Event code 10550 should only be used by states who cannot report separately using codes 10548 and 10549.		Confirmed; unknown from CA
10548	Botulism, other unspecified*	Use code 10548 if you can differentiate "other unspecified" botulism from "wound" botulism; otherwise, use code 10550.		Confirmed; unknown from CA
10549	Botulism, wound*	Use code 10549 if you can differentiate "wound" botulism from "other unspecified" botulism; otherwise, use code 10550.		Confirmed; unknown from CA
10020	Brucellosis*			Confirmed and probable; unknown from CA
10058	Cache Valley virus neuroinvasive disease	Formerly 'encephalitis/meningitis Cache Valley'. Split into neuroinvasive and non-neuroinvasive categories in 2004 CSTE position statement. As of July 1, 2004, these data are reported to CDC through ArboNET and should not be reported through NETSS.		
10066	Cache Valley virus non-neuroinvasive disease	Category created by 2004 CSTE position statement. As of July 1, 2004, these data are reported to CDC through ArboNET and should not be reported through NETSS.		

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Code	Event	Notes+	Verification Procedures	Print Criteria†
10054	California serogroup virus neuroinvasive disease*	Added to NNDL in 1995 (see Encephalitis, primary, 10050). Formerly 'encephalitis/meningitis California serogroup viral'. Split into neuroinvasive and non-neuroinvasive categories in 2004 CSTE position statement. As of July 1, 2004, these data are reported to CDC through ArboNET and should not be reported through NETSS.		Cases with confirmed and probable case status are printed, as per the request of NCID. Only cases reported with a disease onset date are published. Data are aggregated and published according to the week and year of disease onset.
10061	California serogroup virus non-neuroinvasive disease*	Category created by 2004 CSTE position statement. As of July 1, 2004, these data are reported to CDC through ArboNET and should not be reported through NETSS. Added to NNDL in 2005.		Cases with confirmed and probable case status are printed, as per the request of NCID. Only cases reported with a disease onset date are published. Data are aggregated and published according to the week and year of disease onset.
11020	Campylobacteriosis			
10273	Chancroid*	Extended record format available for STD*MIS line-listed data transmitted through NETSS.		All reports are printed.
10274	Chlamydia trachomatis genital infection*	Added to NNDL in 1995. Extended record format available for STD*MIS data transmitted through NETSS.		All reports are printed.
10470	Cholera (toxigenic <i>Vibrio cholerae</i> O1 or O139)*			Confirmed; unknown from CA verified as confirmed
11900	Coccidioidomycosis*	Added to NNDL in 1995.		Confirmed; unknown from CA

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11580	Cryptosporidiosis*	Added to NNDL in 1995.		Confirmed; unknown from CA and Washington (WA)
11575	Cyclosporiasis*	Added to NNDL in 1999.		Confirmed; unknown from CA and WA
10680	Dengue	Formerly 'dengue fever'. As of July 1, 2004, these data are reported to CDC through ArboNET and should not be reported through NETSS.		
10685	Dengue hemorrhagic fever	As of July 1, 2004, these data are reported to CDC through ArboNET and should not be reported through NETSS.		
10040	Diphtheria*	There is no disease-specific extended record transmitted through NETSS for this condition.	Before printing, CDC will verify provisional case reports via consultation with a State Epidemiologist; Following these procedures, all cases meeting print criteria will be printed.	CSTE VPD print criteria are used. Cases with confirmed, probable, and unknown case status are printed.
10053	Eastern equine encephalitis virus neuroinvasive disease	Added to NNDL in 1995 (see Encephalitis, primary, 10050). Formerly 'encephalitis/meningitis, eastern equine'. Split into neuroinvasive and non-neuroinvasive categories in 2004 CSTE position statement. As of July 1, 2004, these data are reported to CDC through ArboNET and should not be reported through NETSS.		Cases with confirmed and probable case status are printed, as per the request of NCID. Only cases reported with a disease onset date are published. Data are aggregated and published according to the week and year of disease onset.

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Code	Event	Notes+	Verification Procedures	Print Criteria†
10062	Eastern equine encephalitis virus non-neuroinvasive disease*	Category created by 2004 CSTE position statement. As of July 1, 2004, these data are reported to CDC through ArboNET and should not be reported through NETSS. Added to NNDL in 2005.		Cases with confirmed and probable case status are printed, as per the request of NCID. Only cases reported with a disease onset date are published. Data are aggregated and published according to the week and year of disease onset.
11087	Ehrlichiosis, human, other or unspecified agent*	Added to NNDL in 2001.		Confirmed and probable; unknown from CA
11085	Ehrlichiosis, human granulocytic* (HGE)	Added to NNDL in 1998.		Confirmed and probable; unknown from CA
11086	Ehrlichiosis, human monocytic* (HME)	Added to NNDL in 1998.		Confirmed and probable; unknown from CA
10070	Encephalitis, post-chickenpox	Deleted from NNDL in 1995.		
10080	Encephalitis, post-mumps	Deleted from NNDL in 1995.		
10090	Encephalitis, post-other	Deleted from NNDL in 1995.		
10050	Encephalitis, primary	Deleted from NNDL in 1995. Replaced by event codes 10051-10058.		
11562	Enterohemorrhagic <i>Escherichia coli</i> (EHEC) shiga toxin+ (serogroup non-O157)	Added to NNDL in 2001. As of January 1, 2006, EHEC codes 11560, 11562, and 11564 were retired and a new code for Shiga toxin-producing <i>Escherichia coli</i> (see code 11563) should be used for reporting.		All reports printed except unknown from NJ for year 2005.
11560	Enterohemorrhagic <i>Escherichia coli</i> (EHEC) O157:H7	Added to NNDL in 1994. As of January 1, 2006, EHEC codes 11560, 11562, and 11564 were retired and a new code for Shiga toxin-producing <i>Escherichia coli</i> (see code 11563) should be used for reporting.		All reports printed except unknown from NJ for year 2005.

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Code	Event	Notes+	Verification Procedures	Print Criteria†
11564	Enterohemorrhagic <i>Escherichia coli</i> (EHEC) shiga toxin+ (not serogrouped)	Added to NNDL in 2001. As of January 1, 2006, EHEC codes 11560, 11562, and 11564 were retired and a new code for Shiga toxin-producing <i>Escherichia coli</i> (see code 11563) should be used for reporting		All reports printed except unknown from NJ for year 2005.
10570	Flu activity code (Influenza)	Data collected for CDC program.		
11570	Giardiasis*	Added to NNDL in 2002.		Confirmed and probable; unknown from CA
10280	Gonorrhea*	Extended record format available for STD*MIS line-listed data transmitted through NETSS.		All reports are printed.
10276	Granuloma inguinale (GI)	Deleted from NNDL in 1995. Extended record format available for STD*MIS line-listed data transmitted through NETSS.		
10590	<i>Haemophilus influenzae</i>, invasive disease*	Extended record format available for NETSS transmission		CSTE VPD print criteria are used. Cases with confirmed, probable, and unknown case status are printed.
10380	Hansen disease (Leprosy)*			Confirmed; unknown from CA
11610	Hantavirus infection	If infection results in illness meeting the hantavirus pulmonary syndrome case definition, use event code 11590 and do not report using code 11610. However, if patient has evidence of infection without meeting the hantavirus pulmonary syndrome case definition, report using 11610.		

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11590	Hantavirus pulmonary syndrome*	Added to NNDL in 1995.	Before printing, CDC will verify provisional case reports via consultation with a State Epidemiologist; Following these procedures, all cases meeting print criteria will be printed.	Confirmed and unknown
42020	Head injury			
11550	Hemolytic uremic syndrome postdiarrheal*	Added to NNDL in 1995.		Confirmed, probable, and unknown
10110	Hepatitis A, acute*	Extended record format available for NETSS transmission.		Confirmed; unknown from CA
10105	Hepatitis B virus infection, chronic*	Added to NNDL in 2003. Per CDC Hepatitis Program, data during calendar years 2003-2006 data will not be re-released or published due to data quality concerns (e.g. duplicate reporting).		Confirmed; unknown from CA
10100	Hepatitis B, acute*	Extended record format available for NETSS transmission.		Confirmed; unknown from CA
10104	Hepatitis B, virus infection perinatal*	Event code 10100 was previously used for this condition.		Confirmed; unknown from CA
10106	Hepatitis C virus infection, past or present*	Added to NNDL in 2003. Per CDC Hepatitis Program, data during calendar years 2003-2006 will not be re-released or published due to data quality concerns (e.g. duplicate reporting).		Confirmed and probable; unknown from CA
10101	Hepatitis C, acute*	Extended record format available for NETSS transmission.		Confirmed; unknown from CA

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10102	Hepatitis Delta co- or super-infection, acute (Hepatitis D)	Data collected for CDC program. Extended record format available for NETSS transmission.		
10103	Hepatitis E, acute	Data collected for CDC program. Extended record format available for NETSS transmission.		
10480	Hepatitis, non A, non B, acute	Deleted from NNDL in 2003.		
10120	Hepatitis, viral unspecified	Deleted from NNDL in 1995.		
10562	HIV Infection, adult*	Not collected through NETSS. Data are not currently supplied by CDC program.		Print criteria are determined by the CDC HIV/AIDS program.
10561	HIV Infection, pediatric*	Not collected through NETSS. Data supplied to NNDSS by CDC HIV/AIDS program on a monthly basis.		Print criteria are determined by the CDC HIV/AIDS program.
10568	Human T-Lymphotropic virus type I infection (HTLV-I)			
10569	Human T-Lymphotropic virus type II infection (HTLV-II)			
11070	Influenza, animal isolates			
11060	Influenza, human isolates			
11061	Influenza-associated mortality*	Only nationally notifiable in children < 18 years of age. Influenza-associated pediatric mortality was added to the NNDL at the beginning of the flu season in October 2004. Data for pediatric influenza deaths are reported to CDC's Influenza Branch via a web-based application. These data should NOT be reported through NETSS. CDC's web-based application limits entry of case reports to the current age group under surveillance. Note that the event code		Cases with confirmed case status are printed.

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		itself is not limited to that age group.		
10059	Japanese encephalitis virus neuroinvasive disease	Formerly 'Japanese encephalitis'. As of July 1, 2004, these data are reported to CDC through ArboNET and should not be reported through NETSS.		
10068	Japanese encephalitis virus non-neuroinvasive disease	As of July 1, 2004, these data are reported to CDC through ArboNET and should not be reported through NETSS.		
50000	Kawasaki Disease			
32010	Lead poisoning			
10490	Legionellosis*			Confirmed; unknown from CA
10390	Leptospirosis	Deleted from NNDL in 1995.		
10640	Listeriosis*	Added to NNDL in 2000. Extended record format available for NETSS transmission.		Confirmed; unknown from CA
11080	Lyme disease*	Extended record format available for NETSS transmission.		Confirmed; unknown from CA
10306	Lymphogranuloma venereum (LGV)	Deleted from NNDL in 1995. Extended record format available for STD*MIS line-listed data transmitted through NETSS.		
10130	Malaria*			Confirmed; unknown from CA
10140	Measles (rubeola), total*	Extended record format available for NETSS transmission.		CSTE VPD print criteria are used. Cases with confirmed and unknown case status are printed.

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10150	Meningococcal disease* (<i>Neisseria meningitidis</i>)	Extended record format available for NETSS transmission.		Confirmed and probable; unknown from CA
11661	Methicillin- or oxacillin-resistant <i>Staphylococcus aureus</i> coagulase-positive (MRSA a.k.a. ORSA)	NCID is working to develop the capacity to support voluntary reporting of MRSA data through the NEDSS Base System. This will help to facilitate the collection and reporting of non-notifiable MRSA data to the NNDSS, by interested states. In addition, NCID currently collaborates with 8 Emerging Infections Program sites in the ABCs Surveillance System to monitor invasive MRSA. States interested in using the ABCs protocol and methods are welcomed to contact Dr. Monina Klevens (MKlevens@cdc.gov, or by phone at 404-498-1213). Findings gathered from both surveillance systems (ABCs and NNDSS) will be used to inform CSTE's decision whether MRSA (ORSA) should be added to the list of nationally notifiable diseases.		
11801	Monkeypox			
42040	Motor vehicle injury	Data for this event are not currently transmitted through NETSS.		
10308	Mucopurulent cervicitis (MPC)	Extended record format available for STD*MIS line-listed data transmitted through NETSS.		

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10180	Mumps*	Extended record format available for NETSS transmission.		CSTE VPD print criteria are used. Cases with confirmed, probable, and unknown case status are printed.
10317	Neurosyphilis*	Extended record format available for STD*MIS line-listed data transmitted through NETSS.		All reports are printed.
10307	Nongonococcal urethritis (NGU)	Extended record format available for STD*MIS line-listed data transmitted through NETSS.		
42060	Other injury			
10309	Pelvic Inflammatory Disease (PID), Unknown Etiology	Extended record format available for STD*MIS line-listed data transmitted through NETSS.		
10190	Pertussis*	Extended record format available for NETSS transmission.		CSTE VPD print criteria are used. Cases with confirmed, probable, and unknown case status are printed.
10440	Plague*		Before printing, CDC will verify provisional case reports via consultation with a State Epidemiologist; cases will be withheld from <i>MMWR</i> publication pending confirmation by NCID. Following these procedures, all cases meeting print criteria will be printed.	All reports are printed.

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10410	Poliomyelitis, paralytic*	There is no disease-specific extended record transmitted through NETSS for this condition.	Before printing, NIP will verify case reports based on an expert panel review. Any case of polio will be withheld from publication pending receipt of NIP expert panel review verification.	Confirmed; unknown from CA that are verified as confirmed
10057	Powassan virus neuroinvasive disease*	Added to NNDL in 2002. Formerly 'encephalitis/meningitis, Powassan'. Split into neuroinvasive and non-neuroinvasive categories in 2004 CSTE position statement. As of July 1, 2004, these data are reported to CDC through ArboNET and should not be reported through NETSS		Cases with confirmed and probable case status are printed, as per the request of NCID. Only cases reported with a disease onset date are published. Data are aggregated and published according to the week and year of disease onset.
10063	Powassan virus non-neuroinvasive disease*	Category created by 2004 CSTE position statement. As of July 1, 2004, these data are reported to CDC through ArboNET and should not be reported through NETSS. Added to NNDL in 2005		Cases with confirmed and probable case status are printed, as per the request of NCID. Only cases reported with a disease onset date are published. Data are aggregated and published according to the week and year of disease onset.
10450	Psittacosis* (Ornithosis)			Confirmed and probable; unknown from CA
10255	Q fever*	Added to NNDL in 1999.		Confirmed and probable; unknown from CA
10340	Rabies, animal*	Animal species reportable in NETSS transmission.		Confirmed and unknown (excluding unknowns from NJ)

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10460	Rabies, human*		Before printing, CDC will verify provisional case reports via consultation with a State Epidemiologist; Following these procedures, all cases meeting print criteria will be printed.	Confirmed; unknown from CA verified as confirmed
11030	Reye syndrome			
11050	Rheumatic fever	Deleted from NNDL in 1995.		
10250	Rocky Mountain spotted fever*			Confirmed, probable, unknown (excluding unknowns from NJ)
10200	Rubella*	Extended record format available for NETSS transmission		CSTE VPD print criteria are used. Cases with confirmed and unknown case status are printed.
10370	Rubella, congenital syndrome*		Before printing, CDC will verify provisional case reports via consultation with a State Epidemiologist; Following these procedures, all cases meeting print criteria will be printed.	CSTE VPD print criteria are used. Cases with confirmed, probable, and unknown case status are printed.
11000	Salmonellosis*	As of January 2006, serotype specific national reporting for salmonellosis was recommended by CSTE and CDC.		Confirmed and probable; unknown from CA

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10575	Severe Acute Respiratory Syndrome (SARS)-associated Coronavirus disease* (SARS-CoV)	Added to NNDL on July 1, 2003. Data supplied to NNDSS by various reporting mechanisms, including NETSS, the SARS web system, and messaging to the SARS web system.	Before printing, CDC will verify provisional case reports via consultation with a State Epidemiologist; cases will be withheld from <i>MMWR</i> publication pending confirmation by NCID. Following these procedures, all cases meeting print criteria will be printed.	Cases with confirmed and probable case status are printed.
11563	Shiga toxin-producing <i>Escherichia coli</i> (STEC)*	As of January 2006, STEC was added to the NNDL and serotype specific national reporting of STEC was recommended by CSTE and CDC. As of January 2006, STEC code 11563 replaces EHEC codes 11560, 11562, and 11564.		All reports printed except unknown from NJ.
11010	Shigellosis*	As of January 2006, serotype specific national reporting for shigellosis was recommended by CSTE and CDC.		Confirmed and probable; unknown from CA
32000	Silicosis	Added to NNDL in 1996.		

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11800	Smallpox*	Deleted from the NNDL in 1988, but added back to the NNDL in 2004.	Before printing, CDC staff will verify all provisional cases reported via consultation with State Epidemiologist; cases will be withheld from <i>MMWR</i> publication pending confirmation by NIP. Following these procedures, all cases meeting print criteria will be printed.	Cases with confirmed and probable case status are printed.
42010	Spinal cord injury			
10051	St. Louis encephalitis virus neuroinvasive disease*	Added to NNDL in 1995 (see Encephalitis, primary, 10050). Formerly 'encephalitis/meningitis, St. Louis'. Split into neuroinvasive and non-neuroinvasive categories in 2004 CSTE position statement. As of July 1, 2004, these data are reported to CDC through ArboNET and should not be reported through NETSS.		Cases with confirmed and probable case status are printed, as per the request of NCID. Only cases reported with a disease onset date are published. Data are aggregated and published according to the week and year of disease onset.
10064	St. Louis encephalitis virus non-neuroinvasive disease*	Category created by 2004 CSTE position statement. As of July 1, 2004, these data are reported to CDC through ArboNET and should not be reported through NETSS. Added to NNDL in 2005		Cases with confirmed and probable case status are printed, as per the request of NCID. Only cases reported with a disease onset date are published. Data are aggregated and published according to the week and year of disease onset.
11710	Streptococcal disease, invasive, Group A*	Added to NNDL in 1995.		Confirmed; unknown from CA and WA
11715	Streptococcal disease, invasive, Group B			

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11716	Streptococcal disease, other, invasive, beta-hemolytic (non-group A and non-group B)	Added for use in the National Electronic Disease Surveillance System Bacterial Meningitis and Invasive Respiratory Disease Program Area Module.		
11700	Streptococcal toxic-shock syndrome*	Added to NNDL in 1995.		Confirmed and probable; unknown from CA
11720	<i>Streptococcus pneumoniae</i> invasive, drug-resistant*	Added to NNDL in 1995.		Confirmed, probable and unknown
11717	<i>Streptococcus pneumoniae</i>, invasive disease*	Added to NNDL in 2001. Only nationally notifiable in children < 5 years.		Confirmed; unknown from CA in children < 5 years old.
50010	Sudden Infant Death Syndrome			
42050	Suicide			
10330	Syphilis interview	Assigned at the request of the CDC STD program, to capture additional information states were interested in transmitting to CDC.		
10316	Syphilis, congenital*	Extended record format available for STD*MIS line-listed data transmitted through NETSS.		All reports are printed.
10313	Syphilis, early latent*	Extended record format available for STD*MIS line-listed data transmitted through NETSS.		All reports are printed.
10314	Syphilis, late latent*	Extended record format available for STD*MIS line-listed data transmitted through NETSS.		All reports are printed.
10318	Syphilis, late with clinical manifestations other than neurosyphilis*	Extended record format available for STD*MIS line-listed data transmitted through NETSS.		All reports are printed.
10311	Syphilis, primary*	Extended record format available for STD*MIS line-listed data transmitted		All reports are printed.

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		through NETSS.		
10312	Syphilis, secondary*	Extended record format available for STD*MIS line-listed data transmitted through NETSS.		All reports are printed.
10310	Syphilis, total primary and secondary*	Used by states not using STD*MIS or other line-listed STD reporting through NETSS, but instead used for transmitting summary data through NETSS.		All reports are printed.
10315	Syphilis, unknown latent*	Extended record format available for STD*MIS line-listed data transmitted through NETSS.		All reports are printed.
10210	Tetanus*	Extended record format available for NETSS transmission		CSTE VPD criteria are used. Cases with confirmed and unknown case status are printed.
10520	Toxic-shock syndrome (staphylococcal)*			Confirmed and probable; unknown from CA
12020	Toxoplasmosis			
10270	Trichinellosis*	Preferred name changed from trichinosis at NCID program request, October 2004. Terms are synonymous but trichinellosis will be encouraged as the preferred term.		Confirmed; unknown from CA
10220	Tuberculosis*	Extended record format for system tracking is available from TIMS for NETSS transmission.		Print criteria are determined by the CDC Tuberculosis program.
10230	Tularemia*	Deleted from NNDL in 1995; Added to NNDL in 1999.		All reports are printed.
10240	Typhoid fever* (caused by <i>Salmonella typhi</i>)			Confirmed and probable; unknown from CA
10260	Typhus Fever, (endemic fleaborne, Murine)	Deleted from NNDL in 1988.		

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11663	Vancomycin-intermediate <i>Staphylococcus aureus</i>* (VISA)	Added to NNDL in 2004.	Before printing, CDC will verify provisional case reports via consultation with a State Epidemiologist; cases will be withheld from <i>MMWR</i> publication pending confirmation with NCID. Following these procedures, all cases meeting print criteria will be printed.	Confirmed; unknown from CA verified as confirmed
11645	Vancomycin-resistant <i>Enterococcus</i>			
11665	Vancomycin-resistant <i>Staphylococcus aureus</i>* (VRSA)	Added to NNDL in 2004.	Before printing, CDC will verify provisional case reports via consultation with a State Epidemiologist; cases will be withheld from <i>MMWR</i> publication pending confirmation with NCID. Following these procedures, all cases meeting print criteria will be printed.	Confirmed; unknown from CA verified as confirmed
10030	Varicella (Chickenpox)*	Added to NNDL in 2003.		VPD print criteria are used. Cases with confirmed, probable, and unknown case status are printed.
10055	Venezuelan equine encephalitis virus neuroinvasive disease	As of July 1, 2004, these data are reported to CDC through ArboNET and should not be reported through NETSS.		
10067	Venezuelan equine encephalitis virus non-neuroinvasive disease	As of July 1, 2004, these data are reported to CDC through ArboNET and should not be reported through NETSS.		
11541	<i>Vibrio parahaemolyticus</i>			

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11540	<i>Vibrio spp.</i> , non-toxigenic, other or unspecified			
11542	<i>Vibrio vulnificus</i>			
10056	West Nile virus neuroinvasive disease*	Added to NNDL in 2002. Formerly 'encephalitis/meningitis, West Nile'. Split into neuroinvasive and non-neuroinvasive categories in 2004 CSTE position statement. As of July 1, 2004, these data are reported to CDC through ArboNET and should not be reported through NETSS. For West Nile fever, use code 10049.		Cases with confirmed and probable case status are printed, as per the request of NCID. Only cases reported with a disease onset date are published. Data are aggregated and published according to the week and year of disease onset.
10049	West Nile virus non-neuroinvasive disease*	Formerly 'West Nile Fever'. Category created by 2004 CSTE position statement. As of July 1, 2004, these data are reported to CDC through ArboNET and should not be reported through NETSS. Added to NNDL in 2005		Cases with confirmed and probable case status are printed, as per the request of NCID. Only cases reported with a disease onset date are published. Data are aggregated and published according to the week and year of disease onset.
10052	Western equine encephalitis virus neuroinvasive disease*	Added to NNDL in 1995 (see Encephalitis, primary, 10050). Formerly 'encephalitis/meningitis, western equine'. Split into neuroinvasive and non-neuroinvasive categories in 2004 CSTE position statement. As of July 1, 2004, these data are reported to CDC through ArboNET and should not be reported through NETSS.		Cases with confirmed and probable case status are printed, as per the request of NCID. Only cases reported with a disease onset date are published. Data are aggregated and published according to the week and year of disease onset.

States can voluntarily report data on any diseases/conditions on this list to CDC through NETSS or NEDSS.

*Diseases in bold have been designated by CSTE as nationally notifiable and should be reported to CDC on a regular basis.

Code	Event	Notes+	Verification Procedures	Print Criteria†
10065	Western equine encephalitis virus non-neuroinvasive disease*	Category created by 2004 CSTE position statement. As of July 1, 2004, these data are reported to CDC through ArboNET and should not be reported through NETSS. Added to NNDL in 2005		Cases with confirmed and probable case status are printed, as per the request of NCID. Only cases reported with a disease onset date are published. Data are aggregated and published according to the week and year of disease onset.
10660	Yellow fever*	As of July 1, 2004, these data are reported to CDC through ArboNET and should not be reported through NETSS.	Before printing, CDC will verify provisional case reports via consultation with a State Epidemiologist; cases will be withheld from <i>MMWR</i> publication pending confirmation by NCID. Following these procedures, all cases meeting print criteria will be printed.	Confirmed and probable; unknown from CA verified as confirmed or probable
11565	Yersiniosis			

†**Print policy for the National Notifiable Diseases Surveillance System:** For a case report of a nationally notifiable disease to print in the *Morbidity and Mortality Weekly Report (MMWR)*, the reporting state or territory must have designated the disease reportable in their state or territory for the year corresponding to the data year of report to CDC. After this criterion is met, the disease-specific criteria listed in the table above are applied. When the above-listed table indicates that “all reports” will be earmarked for printing, this means that cases designated with “unknown” or “suspect” case confirmation status will print just as “probable” and “confirmed” cases will print. Print criteria for Vaccine Preventable Diseases (VPD) reflect the case confirmation status print criteria described by the Council of State and Territorial Epidemiologists (CSTE) 1999 Position Statement #ID-08 entitled “Vaccine Preventable Diseases Surveillance Data.”

+Since CSTE position statements are not generally finalized until July of each year, the NNDSS data for the newly added conditions are not available from all reporting jurisdictions until January of the year following the approval of the CSTE position statement. As

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such, the “Notes” section includes the first full calendar year that a condition was added (or deleted) from the list of nationally notifiable diseases.

Abbreviations and other notes:

CDC	Centers for Disease Control and Prevention
CSTE	Council of State and Territorial Epidemiologists
DHQP	Division of Healthcare Quality Promotion
<i>MMWR</i>	<i>Morbidity and Mortality Weekly Report</i>
NCID	National Center for Infectious Diseases
NEDSS	National Electronic Disease Surveillance System
NETSS	National Electronic Telecommunications System for Surveillance
NIP	National Immunization Program
NNDL	National Notifiable Disease List (infectious diseases reportable to CDC)
NNDSS	National Notifiable Diseases Surveillance System
SSB	Surveillance Systems Branch
STD*MIS	Sexually Transmitted Diseases Management Information System–software for STD surveillance and case management
TIMS	Tuberculosis Information Management System–software for TB surveillance and case management
VPD	Vaccine Preventable Diseases

For purposes of this document, “line-listed” data are meant to mean “case-specific” data.

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*Diseases in bold have been designated by CSTE as nationally notifiable and should be reported to CDC on a regular basis.